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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/997,957	11/30/2001	Joachim Frank	DE920000055US1 (590.080)	5057
35195	7590	10/28/2005	EXAMINER	
FERENCE & ASSOCIATES 409 BROAD STREET PITTSBURGH, PA 15143			VO, HUYEN X	
			ART UNIT	PAPER NUMBER
			2655	

DATE MAILED: 10/28/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

Interview Summary	Application No.	Applicant(s)	
	09/997,957	FRANK ET AL.	
	Examiner	Art Unit	
	Huyen X. Vo	2655	

All participants (applicant, applicant's representative, PTO personnel):

- (1) Huyen X. Vo. (3) Mr. Stanley D. Ference III.
 (2) Ms. Ramya Ananthanarayanan. (4) _____.

Date of Interview: 10/24/2005.

Type: a) ☒ Telephonic b) ☐ Video Conference
 c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☒ No.
 If Yes, brief description: _____.

Claim(s) discussed: 1.


Identification of prior art discussed: Glickman et al. (US 6076059) and Kimber et al. (US 5598507).

Agreement with respect to the claims f) ☐ was reached. g) ☒ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: proposed claim amendment.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.


W. R. YOUNG
PRIMARY EXAMINER

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.


 Examiner's signature, if required